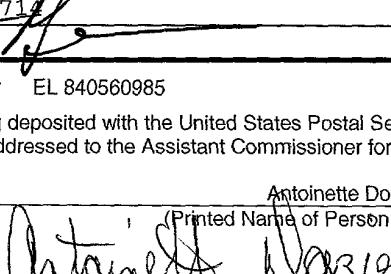
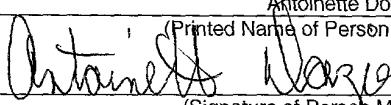


04-05-01

|  |  |   |                          |
|--|--|---|--------------------------|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b>  |  | Attorney Docket No.<br>2000-0567  | Total Pages<br><i>32</i> |
| First Named Inventor or Application Identifier<br>Chaker T. Al Hakim et al.  |  |   |                          |
| Express Mail Label No.<br>EL 840560985   |  | S PTO<br>JC872 U 824378<br>04/02/01   |                          |
| 04/02/01<br><b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents.  |  | ADDRESS TO:<br>Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, D.C. 20231   |                          |
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form<br/>(submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 20]<br/>(preferred arrangement set forth below)</p> <ul style="list-style-type: none"> <li>- Descriptive title of invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings(if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> <p>3. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 1]</p> <p>4. Oath or Declaration [Total Pages 6]</p> <ol style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (unsigned)</li> <li>b. <input type="checkbox"/> Copy from a prior application(37 CFR 1.63(d))<br/>(for continuation/divisional with Box 15 completed)<br/><i>[Note Box 15 below]</i></li> </ol> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br/>Signed statement attached deleting inventor(s)<br/>named in the prior application, see 37 CFR<br/>163(d)(2) and 1.33(b)</p> |  | <p>5. <input type="checkbox"/> Microfiche Computer Program (<i>Appendix</i>)</p> <p>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br/>(if applicable, all necessary)           <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy(identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ol> </p> |                          |
| <b>ACCOMPANYING APPLICATION PARTS</b>  |  |   |                          |
| <p>7. <input type="checkbox"/> Assignment Papers(cover sheet &amp; document(s))</p> <p>8. <input type="checkbox"/> 37 CFR 3.73(b)Statement <input type="checkbox"/> Power of Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br/>Statement(IDS)/PTO-1449 Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br/><i>(Should be specifically itemized)</i></p> <p>13. <input type="checkbox"/> Certified Copy of Priority Document(s)<br/><i>(If foreign priority is claimed)</i></p> <p>14. <input type="checkbox"/> Other: Request And Certification Under<br/>35 U.S.C. 122(b)(2)(B)(i)</p>   |  |   |                          |
| 15. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:  |  |   |                          |
| <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No:<br><i>Prior application information: Examiner: Group/Art Unit:</i>  |  |   |                          |
| For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.   |  |   |                          |
| <b>16. CORRESPONDENCE ADDRESS</b>  |  |   |                          |
| <input type="checkbox"/> Customer Number or Bar Code Label   |  | (Insert Customer No. or Attach bar code label here)   |                          |
| or <input checked="" type="checkbox"/> Correspondence address below  |  |   |                          |
| <b>NAME</b>  | Samuel H. Dworetzky  |   |                          |
| <b>ADDRESS</b>   | AT&T CORP. P.O. Box 4110   |   |                          |
| <b>CITY</b>  | Middletown   | <b>STATE</b>  | New Jersey               |
| <b>ZIP CODE</b>  | 07748-4110   |   |                          |
| <b>COUNTRY</b>   | United States of America   |   |                          |
| <b>17. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>   |  |   |                          |
| <b>NAME</b>  | Robert B. Levy   |   | Reg. # 28234             |
| <b>TELEPHONE</b>   | 908-221-5714   |   | DATE <i>4/02/01</i>      |
| <b>SIGNATURE</b>   | <br>Antoinette Dozier<br>(Printed Name of Person Mailing Paper) |   |                          |
| "Express Mail" Mailing Label Number EL 840560985   |  | Date of Deposit 04/02/2001  |                          |
| I hereby certify that this Doc is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C. , 20231  |  |   |                          |
| Antoinette Dozier<br><br>(Signature of Person Mailing Paper)  |  |   |                          |

# FEE TRANSMITTAL

Patent Fees are subject to annual revision.

|                                    |         |                             |                           |  |
|------------------------------------|---------|-----------------------------|---------------------------|--|
| <b>TOTAL AMOUNT<br/>OF PAYMENT</b> | \$1,122 | <b>Application Number</b>   | <i>Complete if Known</i>  |  |
|                                    |         | <b>Filing Date</b>          |                           |  |
|                                    |         | <b>First Named Inventor</b> | Chaker T. Al Hakim et al. |  |
|                                    |         | Examiner Name               |                           |  |

|                       |           |  |  |  |
|-----------------------|-----------|--|--|--|
| <b>Group/Art Unit</b> |           |  |  |  |
| Attorney Docket No.   | 2000-0567 |  |  |  |

|  |                                    |  |  |  |
|--|------------------------------------|--|--|--|
| <b>METHOD OF PAYMENT</b> (check one)   | <b>FEE CALCULATION</b> (continued) |  |  |  |
| The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: |                                    |  |  |  |

|   |   |                        |                 |
|---|---|------------------------|-----------------|
| Deposit Account Number  | 01-2745   | <b>Fee Description</b> | <b>Fee Paid</b> |
| Deposit Account Name  | AT&T CORP.  |                        |                 |
| <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance |                        |                 |

|                        |  |  |  |  |
|------------------------|--|--|--|--|
| <b>FEE CALCULATION</b> |  |  |  |  |
| <b>1. FILING FEE</b>   |  |  |  |  |

| Large Fee Code      | Entity Fee(\$) | Fee Description  | Fee Paid |
|---------------------|----------------|--|----------|
| 101                 | 710            | Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee | 710      |
| 106                 | 320            | Design Filing Fee                                      |          |
| 108                 | 710            | Reissue Filing Fee                                     |          |
| 114                 | 150            | Provisional Filing Fee                                 |          |
| <b>SUBTOTAL (1)</b> |                |  | 710      |

|                  |  |                        |                 |
|------------------|--|------------------------|-----------------|
| <b>2. CLAIMS</b> | <input type="checkbox"/> Filing Under 37CFR 1.53 (b) | <b>Fee Description</b> | <b>Fee Paid</b> |
|                  | <input type="checkbox"/> CPA Under 37CFR 1.53 (d)    |                        |                 |
|                  | <input type="checkbox"/> Amendment                   |                        |                 |

| Large Fee Code            | Entity Fee(\$) | Fee Description | Fee Paid      |
|---------------------------|----------------|-----------------|---------------|
| Total                     | 34             | - 20 =          | 14 X 18 = 252 |
| Ind.                      | 5              | - 3 =           | 2 X 80 = 160  |
| Multiple Dependent Claims |                |                 | = 0           |

|                                    |                       |   |                      |
|------------------------------------|-----------------------|---|----------------------|
| <b>Large Fee Code</b>              | <b>Entity Fee(\$)</b> | <b>Fee Description</b>                                  | <b>Fee Paid</b>      |
| 103                                | 18                    | Claims in excess of 20                                  |                      |
| 102                                | 80                    | Independent Claims in excess of 3                       |                      |
| 104                                | 270                   | Multiple Dependent Claims                               |                      |
| 109                                | 80                    | Reissue independent claims over original patent         |                      |
| 110                                | 18                    | Reissue claims in excess of 20 and over original patent |                      |
| <b>SUBTOTAL (2)</b>                |                       |   | 412                  |
| * Reduced by Basic Filing Fee Paid |                       |   | <b>SUBTOTAL(3)</b> 0 |

|                       |                                 |             |         |
|-----------------------|---------------------------------|-------------|---------|
| <b>SUBMITTED BY</b>   | <b>Complete (if applicable)</b> |             |         |
| Typed or Printed Name | Robert B. Levy                  | Reg. Number | 28234   |
| Signature             |                                 | Date        | 4/02/01 |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST AND CERTIFICATION  
UNDER  
35 U.S.C. 122(b)(2)(B)(i)**

|                      |   |
|----------------------|---|
| First Named Inventor | A1 Hakim, Chaker T.   |
| Title                | Technique For Providing Intelligent Features For Calls In A Communications Network Independent Of |
| Atty Docket Number   | Network Architecture<br>2000-0567   |

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

4/02/01

Date



Signature

Robert B. Levy

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(a). The information is used by the public to request that an application not be published under 35 U.S.C. 122(b) (and the PTO to process that request). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.